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APPLICATION**

Application Number	09/381,484
Filing Date	02/28/2000
First Named Inventor	Deborah A. Schade
Group Art Unit	
Examiner Name	
Attorney Docket Number	MJ-729

I hereby appoint:

☐ Practitioners at Customer Number 

OR

☒ Practitioner(s) named below:Place Customer  
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Name	Registration Number
Wendell Ray Guffey	31,762

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

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<input checked="" type="checkbox"/> Firm or Individual Name	Wendell Ray Guffey				
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Country	United States of America				
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I am the:

☒ Applicant.☐ Assignee of record of the entire interest  
Certificate under 37 CFR 3.73(b) is enclosed**SIGNATURE of Applicant or Assignee of Record**

Name	Deborah A. Schade
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Signature	<i>Deborah A. Schade</i>
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Date	<i>Aug 31, 2000</i>
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PTO/SB/21 (6-98)

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/381,484
	Filing Date	02/28/2000
	First Named Inventor	Deborah A. Schade
	Group Art Unit	
	Examiner Name	
Total Number of Pages in This Submission	8	Attorney Docket Number MJ-729

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
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<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Wendell Ray Guffey
Signature	<i>Wendell Ray Guffey</i>
Date	August 31, 2000

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: <u>Aug. 31, 2000</u>			
Typed or printed name	Wendell Ray Guffey		
Signature	<i>Wendell Ray Guffey</i>	Date	August 31, 2000

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